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ABSTRACT

This fact sheet examines the Child Care and Development Block Grant (CCDBG) program established by the U.S. Congress in 1990 to support families by increasing the availability, affordability, and quality of child care. It outlines the program's funding level, eligible grantees of CCDBG funds, regulatory requirements, family eligibility, and payment of funds. The fact sheet emphasizes the possibility of collaboration between crisis nursery and respite care programs and CCDBG grantees, in order to ensure that families are supported as effectively as possible. It identifies eight potential areas of collaboration. Contains three references. (JDD)



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The Child Care and Development Block Grant Program

Introduction

In response to the growing need for quality child care, Congress established The Child Care and Development Block Grant Act of 1990, as section 5082 of the Omnibus Budget Reconciliation Act of 1990 (OBRA 90), Public Law 101-508, as amended. The Child Care and Development Block Grant (CCDBG) program is designed to support families by increasing the availability, affordability, and quality of child care in the United States. The CCDBG program is administered through the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF), Administration on Children, Youth, and Families (ACYF), Children's Bureau, Child Care Division.

The Children's Bureau also administers a national network of crisis nursery and respite care programs through the Temporary Child Care for Children with Disabilities and Crisis Nurseries Act of 1986 (25 amended). Crisis nursery and respite care programs provide temporary child care for families to relieve stressful situations which may be situational (i.e., the hospitalization of a parent) or ongoing (caring for a child with disabilities or a child who is HIV-positive). Families and caregivers using respite care services have children with disabilities, chronic Illnesses, or terminal illnesses. Families using crisis nursery services have children who are at risk of abuse and neglect, or, who are receiving child protective services. Additional family support services are also offered to families participating in crisis nursery and respite care programs.

Because the CCDBG and the Temporary Child Care Grantees offer child care services to families with similar needs, there are many ways in which a mutual, collaborative relationship could be beneficial to both the families and the programs.

The first step to effective interagency collaboration is an understanding of the basic program components of each service. This factsheet provides an overview of the Child Care and Development Block Grant Program which may be used to assist crisis nursery and respite care programs in their efforts to establish effective collaboration with CCDBG Grantees. (For more specific information about crisis nursery and respite care services, see ARCH Factsheets Nos. 1 and 2.)

Funding Level

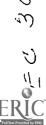
The CCDBG program was authorized for more than \$2.5 billion during the first three years of operation. Appropriation levels were \$732 million for Fiscal Year 1991, \$825 million for FY 1992, and \$892.8 million for FY 1993. These funds are available to States, Territories, Indian Tribes and Tribal Organizations, and do not require a state match.

Eligible Grantees

To receive CCDBG funds, potential Grantees (Lead Agencies) must submit applications to the Secretary of HHS for approval. The Lead Agency is the agency designated by the chief executive of a State, Territory, Indian Tribe or Tribal Organization as responsible for the CCDBG program.

Responsibilities of the Lead Agency include:

- administering the CCDBG program and funds;
- developing the CCDBG Grantee Plan;
- holding at least one public hearing to receive comments on the provision of child care services under the Plan; and
- coordinating the provision of services with other Federal, State, and local child care and early childhood development programs.



State Plan

The CCDBG program focuses on the importance of parental choice in decisions regarding the categories and location of child care providers. This emphasis sends a message of parental responsibility and importance. In the Grantee plan, the Lead Agency shall provide assurances for:

- Parental Choice of Providers Certificates give parents access to a child care provider that may not be under a grant or contract.
- Unlimited Parental Access Parents should have unlimited access to: 1) their children while in child care; and, 2) to the providers caring for their children, during normal hours of operation.
- Parental Complaints Grantees must maintain a record of substantiated parental complaints and make them available to the public on request.
- Consumer Education Consumer Education information should be made available by Grantees to parents and the public concerning licensing, regulatory requirements, complaint , educes, and child care policies and procedures.
- Compliance with State, Tribal, and Local Regulatory Requirements The following are minimum compliance requirements:
 - a. Comply with all State licensing and regulatory requirements (including registration requirements) applicable under State, Tribal, and local law;
 - b. Providers that are not required to be licensed or regulated by State, Tribal, or local law, must register with the CCDBG Grantee prior to payment and to permit the Grantee to furnish information on availability of health and safety training, technical assistance and other relevant information.

Health and Safety Requirements

- Establishment of Health and Safety Requirements

 —These requirements must protect the health and
 safety of children and include:
 - a. Prevention and control of infectious diseases (including immunization);
 - b. Building and physical premises safety; and,
 - Minimum health and safety requirements, appropriate to the provider setting.

Grantees may impose more stringent standards, licensing requirements, or regulatory requirements.

CCDBG Funds

The CCDBG grantee funds shall be divided as follows:

- 75% Child care services, provided to eligible children on a sliding scale fee basis, either as a contracted service or through a certificate program.
- 25%—Activities designed to improve the quality of child care and to increase the availability of before-and after-school services, and early childhood development services. The twenty-five percent is divided as follows:
 - a. 75% (18.75% of the total funding) must be used to establish or expand and conduct, through the provision of grants or contracts: l) early childhood development programs that enhance the educational, social, cultural, emotional, and recreational development of children; or 2) before-and after-school child care programs which are provided for children attending early education programs, kindergarten, elementary or secondary school classes.
 - 20%(5% of the total funding) may be used for quality improvement activities in one or more of the following ways: 1) resource and referral services; 2) making grants or providing loans to child care providers to assist them in meeting State or local standards, including health care standards; 3) monitoring compliance with licensing and regulatory requirements; 4) providing training and technical assistance in areas such as health and safety, nutrition, first aid, the recognition of communicable diseases, child abuse detection and prevention, and care of children with special needs; and 5) improving salaries, benefits, and other compensation for child care staff in CCDBG funded programs.
 - c. 5% (1.25% of the total funding) for either quality improvement or early childhood development and before-and after school programs.

Funds may not be expended for the purchase or improvement of land, or for the construction or permanent improvement of any building or facility. This does not apply to minor remodeling—i.e., remodeling for a child with special needs to meet necessary requirements under the Americans with Disabilities Act(ADA) or the renovation or repair necessary to comply with health and safety standards.



CCDBG funds should be used to supplement, not supplant, existing federal, state, and local programs.

Family Eligibility

- Grantee option, be younger than 13 years old, or, at Grantee option, be younger than 18 or 19 years of age (depending on the State's definition of "dependent child" under Title IV-A of the Social Security Act), and be physically or mentally incapable of caring for themselves, or under court supervision.
- Family income must be 75% or less of the state median income level for a family of the same size.
 Tribal organizations may choose the state median income level or the median income level for their service area.
- Children must reside with their parent(s), or other person "in loco parentis", who are I) working, 2) in a job training or educational program, or 3) are receiving or in need of protective services. In twoparent families, both parents must be working.
- Priority is given to families with very low incomes (family size taken into account) and children with special needs.
- Children receiving child care through grants awarded to Indian Tribes or Tribal Organizations have dual eligibility under the CCDBG program and may receive additional services provided under the State Lead Agency.

Providers

In order to maximize parental choice, CCDBG funding extends to a broad range of child care providers, including child care centers, group homes, family child care providers, in-home care providers, and sectarian organizations. Both the family child care provider and the inhome provider can include care by relatives, neighbors or friends. ALL providers must 1) be licensed, regulated or registered under the State law, and, 2) satisfy state and local health and safety requirements.

Payment

The CCDBG funds shall be used as payment for child care services in the form of grants, contracts, and/or certificates. The CCDBG distinguishes between certificates, which are considered assistance to parents, and grants and contracts that are treated as assistance to providers.

Certificates are disbursements or vouchers that enable parents more flexibility in choosing a child care provider. Child care providers must register with the Grantee in order to receive certificates.

Certificates only, not grants or contracts, may be used for payment to sectarian organizations.

A sliding fee scale, which takes into account family size and income, shall provide cost sharing by the families that receive assistance in accordance with Grantee guidelines.

Payment rates should ensure equal access for CCDBG eligible children and families, which are comparable to child care services in the same area for children and families who are not eligible for CCDBG services.

Payment rates should take into account the variations in the costs for providing child care in different settings, to children of different ages, and additional costs for children with special needs.

Parents may NOT be paid for taking care of their own children.

Other Considerations

Grantees are given the flexibility to waive certain requirements, or add additional eligibility requirements as a method of targeting their programs. Examples cited in the Federal regulations include:

- The flexibility to define "employed" to include families "seeking employment." This could include homeless families.
- Income allowances for a family who has a child with special needs could occur by disregarding a portion of family income or the child's medical expenses.
- A child receiving, or in need of, protective services may receive respite care/crisis nursery care with CCDBG funds.
- Separate fee schedules and income limits for families receiving, or in need of, protective services may be established in general or protective services workers may be allowed to waive the income eligibility requirement and fee on a case-by-case basis.
- A child in foster care may be considered as a family of one, for r urposes of income eligibility.
- Respite care/crisis nursery care is allowable for children in foster care if the general eligibility criteria (e.g. that the foster parent(s) is working or attending a job training or educational program) is met.



Callaboration

There are many possible areas in which collaboration between crisis nursery and respite care programs and CCDBG Grantees could occur. Collaboration should be mutually beneficial. In determining potential areas of collaboration, consider the following suggestions:

- Information and referral systems;
- Facilities;
- Staff (including child care providers);
- Joint training on topics pertinent to both programs such as child development, CPR, first aid, universal precautions, cultural awareness, child abuse detection and prevention, and disability awareness;
- Support services for parents/caregivers such as parenting classes, medical services, counseling, help lines, employment training;
- Service to children with special needs such as disabilities, HIV positive, medical conditions, potential or identified abuse and neglect;
- Joint public awareness materials and/or campaigns; and,
- Funding.

Summary

The CCDBG program is the newest of several federal child care programs offered by ACF. The Federal government is working toward collaboration between programs to provide seamless child care services. Coordinating with existing child care programs will help ensure that the varying needs of children and families are met. And, even though eligibility may change over time, coordination and collaboration may help ensure provision of child care services without the necessity of changing the child care provider or it could create a complete day of child care services (e.g. respite care for a child with disabilities before and after school while the parent is at work). Crisis nursery and respite care programs, which also provide child care services, have the potential for coordinating and collaborating with CCDBG Grantees to help support families as effectively as possible.

For more information about individual CCDBG Grantees, contact the agency in your State responsible for child care services, your local Tribal Council, or call the ARCH National Resource Center Coordinating Office at 1-800-473-1727.

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